PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09766007

CLAIMS AS FILED - PART (Column 1)					(Column 2)			SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			90					ŘATÉ .	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		ВА	ASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			2 0 minus 20=		-			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			6 minus 3 =		·3			X40=		OR	X80=	240-00	
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT					+135=		OR	+270=		
* If the difference in column 1 is less than zero, ente					r "0" in c	olumn 2	<u> </u>	TOTAL		OR	TOTAL	75 B 00	
	C	LAIMS AS A	MENDED - PART II								OTHER		
		(Column 1)	(Colum			(Column 3)		SMALL E		OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	j.	
	Independent	•	Minus	***		=		X40=		OR	X80=		
L	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	T CLAIM			+135=		OR	+270=	1.3	
TOTAL											TOTAL		
											ADDIT. FEE		
AMENDMENT B		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIGI NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA	ΙГ	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total		Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X40=		OR	X80=		
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	T CLAIM		<u> </u>	+135=		OR	+270=		
										OR	TOTAL ADDIT. ÆE		
		(Column 1)		(Colu	ımn 2)	nn 2) (Column 3)		DIT. FEE			ADDIT. RECI		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIG NUM PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=		X\$ 9=		OR	X\$13=		
	Independent	•	Minus	***		<u> </u> =	↓ T	X40=		OR	X8(=		
L	FIRST PRESENTATION OF MULTIPLE DEF				IT CLAIN		J -	+135=		1	+270=		
	If the entry in colu	umn 1 is less than	the entry in co	lumn 2, wri	te "0" in co	olumn 3.	L	TOTAL		OR	TCTAL		
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												